

# MISSOURI WIC PROGRAM

## Preparing WIC Checks For Deposit

If there are **two or more** checks being used at the same time, separate receipts must be generated for each check.

### 1. REVIEW THE WIC CHECK FOR COMPLETENESS:

- Is there a DATE USED written on the check?
- Is there a TOTAL SALES AMOUNT written on the check?
- Is there a PARTICIPANT'S SIGNATURE on the check?

*If no, refer to Section 4.2 in the WIC Vendor Manual.*

### 2. REVIEW THE DATE USED:

- Is the DATE USED within the FIRST and LAST DATES TO USE?
- Is the DATE USED written legibly?
- Does the DATE USED match the date on the receipt?

*If no, refer to Section 4 of the WIC Vendor Manual.*

### 3. REVIEW THE TOTAL SALES AMOUNT:

- Is the TOTAL SALES AMOUNT less than or equal to the MAXIMUM PURCHASE PRICE MUST NOT EXCEED AMOUNT?
- Are the foods listed on the receipt WIC approved types, brands and sizes?
- Are the quantities less than or equal to what is printed on the check?

*If no, refer to Section 4.2 in the WIC Vendor Manual.*

### 4. STAMP THE FOUR (4) DIGIT VENDOR ID STAMP NUMBER ON THE WIC CHECK:

- Use **BLACK INK** only when stamping the vendor ID number on the check.
- Is the ID number legible? If no, inspect the stamp to see if it needs to be cleaned or replaced. Does the stamp need to be re-inked? If no, re-stamp the ID number in the Food Section.

THIS CHECK IS PRINTED ON WHITE PAPER WITH GREEN INK																															
PARTICIPANT #	LAST NAME	FIRST NAME	AGENCY #	ISSUER ID																											
					XXXXXXXXXX																										
<b>MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES WIC PROGRAM</b>			<b>SOUTHERN NATIONAL BANK</b> <small>NARRETTA, GA.</small>																												
<b>ANY AUTHORIZED MISSOURI WIC VENDOR ONLY</b> <b>VALID ONLY FOR THE PURCHASE OF:</b>			<b>MAXIMUM PURCHASE PRICE MUST NOT EXCEED</b>																												
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#### MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES, WIC and Nutrition Services

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